

Application No.: 10/009,431
 Filed: February 13, 2002
 TC Art Unit: 1636
 Confirmation No.: 2347

Rev 06/04

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Via Facsimile

COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

Date: July 16, 2004

Attorney

Docket No.: MBP-007XX

Sir:

In re application of: Klaus Unsicker et al

Entitled: **NEUROPROTECTIVE PROPERTIES OF GDF-15, A NOVEL MEMBER
 OF THE TGF- β SUPERFAMILY**

Transmitted herewith is an amendment in the above-identified application. The following checked items are applicable:

- ☐ This is a Request for Continued Examination under §1.114; authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$) per §1.17(e).
☐ Enter the unentered amendment previously filed on _____ per §1.116.
- ☒ A Petition for Extension of Time for 1 month is hereby made under §1.136(a); authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$55.00) per §1.17.
- ☒ In the event a Petition for Extension of Time is required by this paper and not otherwise provided, such Petition is hereby made and authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of such extension.
- ☐ Other:

| CLAIMS AFTER AMENDMENT: | MINUS PRIOR PAID CLAIMS: | EQUALS PRESENT EXTRA CLAIMS: | RATE: | ADDITIONAL FEE: |
|---|-----------------------------|---------------------------------|--------------|--------------------|
| Independent | 2 - 3 | = -0- | x \$86.00 = | -0- |
| Total | 26 - 26 | = -0- | x \$18.00 = | -0- |
| <input type="checkbox"/> Multiple Dependent Claims (1st presentation) | | | + \$290.00 = | -0- |
| SUBTOTAL ADDITIONAL FEE | | | | -0- |
| Small Entity filing, divide by 2. Small Entity status must be asserted. | | | | -0- |
| TOTAL ADDITIONAL FEE | | | | -0- |

- ☒ No additional fee. ☐ The fee has been calculated above; authorization is provided herewith to charge Deposit Account No. 23-0804 (\$) for the cost of same.
- ☒ The Commissioner is hereby authorized to charge payment of any additional filing fees under §1.16 associated with this communication or credit any overpayment to Deposit Account No. 23-0804.

I hereby certify that this correspondence is being sent via facsimile to Examiner Gerald G. Leffers, TC Art Unit 1636, Fax No. (703) 872 9306, on July 16, 2004.

SUBMIT IN TRIPLICATE
 HCH/raw 308908-1

Holliday C. Heine
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